

State of Alabama Unified Judicial System Form C-10 Page 1 of 2	AFFIDAVIT OF SUBSTANTIAL HARDSHIP AND ORDER <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-top: 5px;">RECEIVED</div>	Case Number <div style="font-size: 1.2em; font-family: cursive;">2:07-cv-984-MHT</div>
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IN THE _____ District COURT OF _____ Montgomery, ALABAMA
 (Circuit, District, Municipal) 2007 (Name of County or Municipality)

STYLE OF CASE: Patrick J. Charest v. Alabama Pardon & Paroles et. al.,
 Plaintiff(s) Defendant(s)

TYPE OF PROCEEDING: 1983 tortfeasor CHARGE(S) if applicable: 14th. Amendment-violations
 MIDDLE DISTRICT ALA

☒ **CIVIL CASE** -- I, because of substantial hardship, am unable to pay the docket fee and service fees in this case. I request that these fees be waived initially and taxed as costs at the conclusion of the case.

☐ **CIVIL CASE** -- (such as paternity, support, termination of parental rights, dependency) - I am financially unable to hire an attorney and I request the court to appoint one for me.

☐ **CRIMINAL CASE** -- I am financially unable to hire an attorney and request that the court appoint one for me.

☐ **DELINQUENCY/NEED OF SUPERVISION** -- I am financially unable to hire an attorney and request that the court appoint one for my child/me.

AFFIDAVIT

SECTION I.

1 IDENTIFICATION

Full name Patrick Joseph Charest #182262 Date of birth February 09th. 1958

Spouse's full name (if married) not applicable

Complete home address C/O Limestone Correctional Facility

Number of people living in household N/A

Home telephone number N/A

Occupation/Job N/A Length of employment N/A

Driver's license number C62367058049-FL *Social Security Number 184-46-5735

Employer N/A Employer's telephone number N/A

Employer's address N/A

2 ASSISTANCE BENEFITS

Do you or anyone in your household receive benefits from any of the following sources? (if so, please check those which apply.)

☐ AFDC ☐ Food stamps ☐ SSI ☐ Medicaid ☐ Other N/A

3 INCOME/EXPENSE STATEMENT

Monthly Gross Income:

Monthly Gross Income	\$ <u>\$200.00 per Month</u>
Spouse's Monthly Gross Income (unless a marital offense)	<u>N/A</u>
Other Earnings: Commissions, Bonuses, Interest Income, etc.	<u>N/A</u>
Contributions from Other People Living in Household	<u>N/A</u>
Unemployment/Workmens's Compensation,	<u>N/A</u>
Social Security, Retirements, etc.	<u>N/A</u>
Other Income (be specific) <u>N/A</u>	<u>N/A</u>
TOTAL MONTHLY GROSS INCOME	\$ <u>\$200.00 per month</u>

Monthly Expenses:

A. Living Expenses	\$ <u>None</u>
Rent/Mortgage	<u>None</u>
Total Utilities: Gas, Electricity, Water, etc.	<u>None</u>
Food	<u>\$150 - \$190</u>
Clothing	<u>None</u>
Health Care Insurance	<u>\$3.00 co-pay per visits</u>
Car Payment(s)/Transportation Expenses	<u>None</u>
Loan Payment(s)	<u>None</u>

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AFFIDAVIT OF SUBSTANTIAL HARDSHIP AND ORDER**Monthly Expenses: (con'd page 1)**

Credit Card Payment(s)

None

Educational/Employment Expenses

None

Other Expenses (*be specific*) Coffee, Tablets, Stamps

\$5-\$10 per month

Vitamins, Cosmetics, Batteries etcetera

Sub-Total

A \$200.00 per month

B. Child Support Payment(s) Alimony

\$950.00 per month

Sub-Total

B neg.\$950 per mon.

C. Exceptional Expenses

\$ None

TOTAL MONTHLY EXPENSES (add subtotals from A & B monthly only) \$ \$950.00 arrears

Total Gross Monthly Income Less total monthly expenses:

DISPOSABLE MONTHLY INCOME

\$ None

4 LIQUID ASSETS:Cash on Hand/Bank (*or otherwise available as stocks, bonds, certificates of deposit*)

\$ approx. \$40.00

Equity in Real Estate (value of property less what you owe)

None

Equity in Personal Property, etc (such as the value of motor vehicles, stereo, VCR, furnishing, jewelry, tools, guns, less what you owe)

None

Other (*be specific*)Do you own anything else of value? ☐ Yes ☐ No

(land, house, boat, TV, stereo, jewelry)

None

If so, describe

TOTAL LIQUID ASSETS

\$ \$40.00 dollars

5 Affidavit/Request

I swear or affirm that the answers are true and reflect my current financial status. I understand that a false statement or answer to any question in the affidavit may subject me to the penalties of perjury. I authorize the court or its authorized representative to obtain records of information pertaining to my financial status from any source in order to verify information provided by me. I further understand and acknowledge that, if the court appoints an attorney to represent me, the court may require me to pay all or part of the fees and expenses of my court-appointed counsel.

Sworn to and subscribed before me this

day of

Oct

2007

Affiant's Signature

Patrick Joseph Charest #182262

Print or Type Name

Judge/Clerk/Notary

Commission Expires:

8-26-11

ORDER OF COURT**SECTION II.****IT IS THEREFORE, ORDERED, AND ADJUDGED BY THE COURT AS FOLLOWS:**☐ Affiant is not indigent and request is DENIED.

☐ Affiant is partially indigent and able to contribute monetarily toward his/her defense; therefore defendant is ordered to pay \$ _____ toward the anticipated cost of appointed counsel. Said amount is to be paid to the clerk of court as otherwise ordered and disbursed as follows: _____

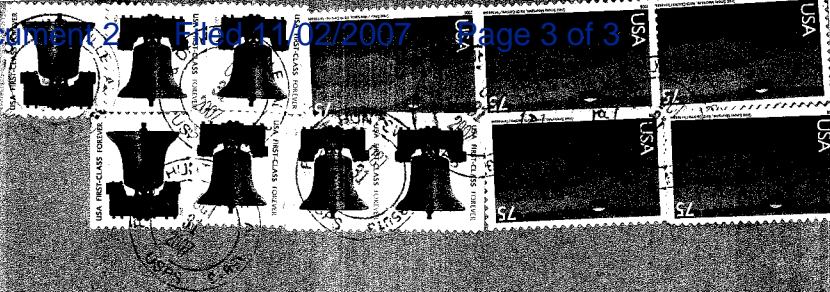
☐ Affiant is indigent and request is GRANTED.☐ The prepayment of docket fees is waived.

IT IS FURTHER ORDERED AND ADJUDGED THAT _____ is hereby appointed as counsel to represent affiant.

IT IS FURTHER ORDERED AND ADJUDGED that the court reserves the right and may order reimbursement of attorney fees and expenses, approved by the court and paid to the appointed counsel, and costs of court.

Done this _____ day of _____

Judge



CYAREST, PATRICK #182262
Limestone Correctional Facility
28779 Nick Davis Road
Harvest, Alabama
35749-7009

5/983
TORI

have not been received by the Alabama
Department of Corrections is not
responsible for the substance or content
of the enclosed communication.

The United States District Court
Attention: Honorable Debra P. Blackett
Post Office Box # 711
Montgomery, Alabama
36101